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DEC 29 2003

TC 1700

298500.01098

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: P. Kumar
Donna Joy GUINN)	
	:	Group Art Unit: 1751
Application No.: 10/045,753)	
	:	
Filed: January 11, 2002)	December 17, 2003
	:	
For: LEATHER AND TEXTILE)	
TREATMENT METHOD	:	
)	

Mail Stop Non-Fee Amendment
Commissioner for Patents
Washington, D.C. 20231

AMENDMENT AND PETITION FOR EXTENSION OF TIME

Sir:

Applicant respectfully requests that the time for responding to the Office Action mailed on July 18, 2003, be extended for two months, from October 18, 2003, to December 18, 2003. The Commissioner is hereby authorized to charge the \$210.00 fee for a two month extension of time to Deposit Account No. 50-1710.

In response to the Office Action mailed on July 18, 2003, kindly amend the above-identified application as follows:

12/19/2003 CNGUYEN 00000038 501710 10045753
01 FC:2252 210.00 DA

41
RECEIVED**DEC 29 2003****TC 1700**Docket No. 298500.01098
1751-
/

In re Application of:

Donna Joy GUINN

Application No.: 10/045,753

Examiner: P. Kumar

Filed: January 11, 2002

Group Art Unit: 1751

For: LEATHER AND TEXTILE
TREATMENT METHOD

Date: December 17, 2003

Mail Stop Non-Fee Amendment
Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ No additional claims fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 13	MINUS	** 20	= 0	x \$9 \$18	\$0.00
INDEP. CLAIMS	* 3	MINUS	*** 3	= 0	x \$43 \$86	\$0.00
Fee for Multiple Dependent claims \$135□/\$270						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ Charge the \$_____ additional claims fee to Deposit Account No. 50-1710. A duplicate copy of this sheet is enclosed.

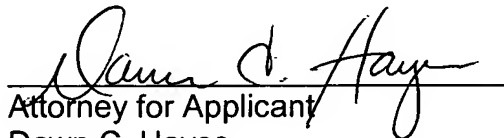
☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 50-1710 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 50-1710. A duplicate copy of this paper is enclosed.

☒ Charge the \$ 210.00 extension fee for a two (2) month extension of time to Deposit Account No. 50-1710. A duplicate copy of this sheet is enclosed.

☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicant's undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 625-3500. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicant
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Registration No. 44,751

Patent Administrator
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